## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

į	My residence, post office address and citizenship are as stated below next to my name; that
	I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint
nven	tor (if plural inventors are named below) of the subject matter which is claimed and for which a natent is sought on the

inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

invention entitled: SINGLE-SI	DED PAPER PHENOI	IC RESIN COP	PER-CLAD LAMI	NATE WITH BOTH
SIDES HAV	ING RESISTS OF S	SAME MATERIAL		
described and claimed in	the specification:			
Check one				
*a. 첩 attached l	hereto.			
b. □ filed on _	as Applicat	ion No	and amended on	<u> </u>
				(if applicable)
Í hereby state th	at I have reviewed and under	stand the contents of tl	he above-identified speci	fication, including the claims,
as amended by any amer	ndment referred to above.			
A acknowledge th	ne duty to disclose to the Offic	e all information know	on to me to be material	to patentability as defined in
Title 37, Code of Feder	ral Regulations, §1.56. Unde	r Title 35, U.S. Code	§119, the priority bene	efits of the following foreign
application(s) and/or Uni	ited States provisional applica	tion(s) filed within one	year prior to this applica	tion are hereby claimed:
	•	•		•
Japanese Pat	ent Application No. 2001-385	8 filed on February 15.	2001	
1	••	• ,		
	olication(s) for patent or inver	tor's certificate on this	invention were filed in o	ountries foreign to the United
				e of the above-named foreign
	d/or United States provisional		(+)	
prigray approximon(o) an	au chica balos provincia	. арранио- (о).		
test <sup>2</sup>	•			
<b>_</b>				
T. I homby appoint	the following as my attorner	ze of record with full n	ower of substitution and	d revocation to prosecute this
	act all business in the Patent (		ower or substitution and	revocation to prosecute time
- A	Oliff, Reg.No.27,075; William		094: Kirk M. Hudson, F	Reg No 27 562:
tes T	. Pardini, Reg.No.30,411; Edw			
Thomas J.				
ALL CODDECTOR	Mario A. Costantino, Reg			
				O OLIFF & BERRIDGE, P.O.
BOX 19928, ALEXANDI	RIA, VIRGINIA, 22320, TELI	EPHONE (103) 836-640	<b>.</b>	
		1.11	Alice De alematene and Ale	-+ -11 -+-+
hereby declare	that I have reviewed and und	erstand the contents of	this Declaration, and the	at all statements made herein
of my own knowledge a	re true and that all statemen	its made on information	n and belief are believed	d to be true; and further that
these statements were	made with the knowledge th	at willful false stateme	ents and the like so ma	de are punishable by fine or
			es Code and that such	willful false statements may
jeopardize the validity of	the application or any patent	issued thereon.		
m T. 11 h .				
Typewritten Full Name of Sole or First Inventor	Tokooki			ONO
of Sole of Thist inventor	Given Name	Mic	ldle Initial	Eamily Name
**Inventor's Signature			·	Ono
** Date of Signature	February	6		2002
	Month	Day	у	Year
Residence <u>Iwata-gur</u>	L		zuoka-ken	Japan
City		Sta	te of Province	Country
Citizenship <u>Japanese</u> Post Office Addres	o/o Minohoo C	o Ltd Hamamaton M	anufacturing Unit , 174	3-1 Asana, Asaha-cho.
Post Office Addres		o, 140. Hamamatsu M izuoka-ken, Japan	throughout City VIX	C A A CHANGE CONTROL OF THE CONTROL
	luding country)	WANTED AND AND AND AND AND AND AND AND AND AN		
auuroo, ma				

<sup>\*</sup>This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

<sup>\*\*</sup>Note to Inventor. Please sign name exactly as it appears above and insert actual date of signing.

## PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

Typewritten Full Name							
of Second Joint							
Inventor (if any) Sadayuki	2011	TODA					
Given Name	Middle Initial	Family Name					
**Inventor's Signature Sada	juki	Joda					
*Date of Signature February	6	2002					
Month	Day	Year					
Residence <u>Iwata-gun</u>	Shizuoka-ken	Japan					
City	State or Province	Country					
Citizenship Japanese	Post Office Address <u>c/o Minebea Co., Ltd. Hamamatsu Manufacturing Unit, 1743-1 Asana, Asaba-cho,</u>						
	(Insert completing mailing Iwata-gun, Shizuoka-ken, Japan						
address, including country)							
Typewritten Full Name							
of Third Joint							
Inventor (if any)Given Name	Middle Initial	Family Name					
		I tilling I turne					
**Inventor's Signature							
*Date of Signature  Month  Residence	Day	Year					
Decidence	·	1002					
Residence City	State or Province	Country					
Citizenshin							
Post Office Address							
(Insert completing mailing							
address, including country)							
Typewritten Full Name of Fourth Joint Inventor (if any)	No. 11 Total	Davida Na					
	Middle Initial	Family Name					
*Date of Signature							
Month	Day	Year					
Residence	Ctata ou Province	Country					
City Citizenship	State or Province	Country					
• -							
(Insert completing mailing							
address, including country)							
addies, madding wand /							
Typewritten Full Name							
of Fifth Joint							
Inventor (if any)							
Given Name	Middle Initial	Family Name					
**Inventor's Signature							
*Date of Signature							
Month	Day	Year					
Residence							
City	State or Province	Country					
Citizenship							
Post Office Address							
(Insert completing mailing							
address including country)							

<sup>\*\*</sup> Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of attorney form of the application to which it pertains.